



ALEXANDRIA STATION

## ARCHITECTURAL CHANGE FORM APPLICATION

Per Midtown Alexandria Station Condominium Unit Owners Association (MASC) By-laws, Section 5.7, any unit owner wishing to change their unit or common areas should carefully read the MASC Governing Documents and must complete this form. The completed form must be submitted to the management office. It is the unit owner's responsibility to confirm that management received his or her application.

MASC Management Office  
2451 Midtown Avenue #199  
Alexandria, VA 22303  
703-329-4080

-or-

**Please submit forms online to:**  
MASC.MGT@gmail.com  
masc.rules@gmail.com

This form **must** be completed by any owner wishing to make the following changes within his or her unit. This list is intended to clarify the use of this form and may not be all encompassing.

- ✓ Replacing flooring of any kind (i.e. installing wood flooring in lieu of carpeting; replacing tile, etc) Note: Underlayment for flooring is required.
- ✓ Replacing permanent cabinetry
- ✓ Replacing unit's entry door hardware
- ✓ Modifying walls not fully contained within your unit/shared walls (i.e. soundproofing)
- ✓ Any work that involves new or altered electrical, mechanical, or plumbing connections
- ✓ Bathroom remodeling

**Please Note:** The concrete ceilings and floors contain post-tension cables. Pursuant to Section VII, Decorating and Remodeling, of the Unit Owner and Resident Procedures and Regulations Handbook, unit owners are **not permitted** to cut, drill, hammer, screw, anchor, or perform any other construction on concrete ceilings or floors. If you or your contractor alter the concrete and damage one of the cables, you will be responsible for the **costly repairs**.

This form and written approval is not required for personal decorating choices such as:

- ✓ Painting of surfaces contained entirely within your unit
- ✓ Installation of kitchen backsplash
- ✓ Installation of closet organization systems provided they do not anchor into the concrete
- ✓ Replacing appliances (note the addition of appliances is strictly forbidden)
- ✓ Modification of door swing / type of doors contained entirely within your unit

Management will return a copy of this form reflecting the decision made by the Board of Directors within **45** days of receipt of a **complete** application. If the Board fails to respond within 45 days, the application is deemed approved, pursuant to Bylaws Section 5.7. If, however, management must request additional information from you in order to complete the application, the 45-day response period begins when you provide all requested information. Please schedule work to begin with enough time allotted for application review by the Committee to prevent delays in your work. You may not begin work prior to Committee approval notice.

## ARCHITECTURAL CHANGE FORM PAGE 2 - OWNER APPLICATION

Owner's Name: \_\_\_\_\_ Unit Number: \_\_\_\_\_

Home Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Company/Contractor Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Construction Start Date: \_\_\_\_\_ Construction End Date: \_\_\_\_\_

Documentation that **must** be included with your request:

- ✓ A copy of the individual/company/contractor's current insurance certificate.
- ✓ For installation of flooring: details of the underlayment material being used.
- ✓ A complete and detailed description of your proposed changes, including sketches of the proposed change, as applicable.

### Resident Acknowledgements

☐ I acknowledge that work will be performed Monday through Saturday between the hours of 8 a.m. and 6 p.m.

☐ I acknowledge that I, the unit owner, am aware of and have communicated to my contractor that we are responsible for removing any project related debris (eg. old flooring, excess materials, etc.) from MASC property and that we may not place any such materials in the MASC garbage areas.

☐ I acknowledge that I, the unit owner, am in good standing with MASC; my HOA account is current and I have no overdue assessments.

Owner's Signature: \_\_\_\_\_ Date Submitted: \_\_\_\_\_

### MANAGEMENT OFFICE USE ONLY

Manager receiving application: \_\_\_\_\_ Date Received: \_\_\_\_\_

### Review Stamp & Comments

☐ Approved as submitted. Manager Sign & Date: \_\_\_\_\_

☐ Approved subject to conditions (conditions attached)

☐ Disapproved (reasons or steps necessary for approval attached)

☐ Suspended pending additional information (indicate date suspended with the additional information required for consideration on an attached document)